PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450

Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

	\v. \ \ \v. \ \ \ \ \ \ \ \ \ \ \ \ \ \						
NSTRUCTIONS: This for appropriate. All further con indicated unless corrected la maintenance fee notification	rm should be used for ran respondence including the below or including the	smitting the ISSUE F Patent, advance orders in Block 1, by (a) spe	EE and PUBLIC and notification ecifying a new co	ATION FEE (if requ of maintenance fees orrespondence address	ired). Blocks I through 5 s will be mailed to the current ; and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
MCKEE, VOOR ATTN: PIONEER 801 GRAND AVE	NUE, SUITE 3200	L.C.		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
DES MOINES, IA	50309-2721		LILA A. T. AKRAD		T. AKRAD	(Depositor's name)	
				Ada a	(flerd	(Signature)	
			(5-26-06		(Date)	
APPLICATION NO.	FILING DATE	: FIRS	T NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/769,109 FITLE OF INVENTION: H	01/30/2004 YBRID MAIZE 39F59	Jo:	achim Ernst Kram	ner	P06648US00 - 1866	1711	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		SO \$300	\$1400 #/700	08/02/2006	
EXAMINER		ART UNIT CLASS-SUBCLASS		ASS-SUBCLASS]		
MEHTA, ASHWIN D 16				800-320100			
CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicates	e address or indication of "F dence address (or Change of 22) attached. tion (or "Fee Address" Indication more recent) attached. Use	Correspondence (1) tion form real a Customer 2	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 MCKEE, VOORHEES & SEASE, P.L 2 801 Grand Ave., Suite 3200 DES MOINES, IOWA 50309-2721				
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignment of the patent of the							
lease check the appropriate	assignee category or catego	ries (will not be printed	d on the patent):	☐ Individual 🏻 C	orporation or other private gr	oup entity Government	
ia. The following fec(s) are Issue Fee December Publication Fee (No see Advance Order - # of	mall entity discount permitte	(d) \(\sigma\)	D. Payment of Fec(s): A check in the amount of the fec(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fec(s), or credit any overpayment, to Deposit Account Number 26-0084 (enclose an extra copy of this form).				
a. Applicant claims S	(from status indicated above MALL ENTITY status. Sec	37 CFR 1.27.	b. Applicant is no	longer claiming SMA	LL ENTITY status. Sec 37 C	FR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and P nterest as shown by the reco	is requested to apply the Issublication Fee (if required) words of the United States Pater	ie Fee and Publication livil not be accepted from the accepted from the and Trademark Offi	Fee (if any) or to manyone other the ice.	re-apply any previous an the applicant; a reg	y paid issue fee to the applicated attorney or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature Like a 1 almost Date 5-26-06							
Typed or printed name LILA A. T. AKRAD Registration No. 52,550							

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.